团我的孩子願意加入樂施會**助人自助**的行動,成為**小小樂施之友**。

(23IT2006)



My child wants to be an Oxfam Kid and donate monthly.

捐款者個人資料 Donor's Personal Information (請盡量以英文正楷填寫 IN BLOCK LETTERS) 英文姓名: 姓 Surname _____ 中文姓名 Chinese name: ___ 出生日期 Date of Birth : /日 dd /月 mm /年 yy 身份証號碼 ID Card No.: (為免捐款者記錄重覆·煩請填寫。To avoid donor record duplication only.) 地址 Address:_ _____ 通訊語言 Language 🔲 中文 Chinese 🔲 英文 English 電郵 E-mail: 收據姓名(如與上述不同) Name on Receipt (if different from above): _ 請選擇 🛛 信用卡 Credit Card 或 or 🔘 自動轉賬 Autopay 捐款方法 Donated by: 每月捐款額(澳門幣) Monthly Donation Amount MOP 信用卡 Credit Card UVISA UMASTER UnionPay (請傳真至 Please fax to 853-28757667) 信用卡有效期至 Card expiry date: _____ 月 mth / ____ 年 yr 信用卡號碼 Card No.: 持卡人簽名 Cardholder's signature: 持卡人姓名 Cardholder's name: (信用卡每月捐款將在收到此表格後約 10 個工作天生效·並會在每月 10 至 15 號左右過數。每月捐款將於該信用卡到期再續後繼續自動過數。直至閣下另行通知樂施會。 Monthly donation payment will become effective 10 working days after receipt of this form. Thereafter, transactions will normally be processed around the 10th to 15th of every month. Monthly donation via credit card will continue after the expiry date of the credit card and upon renewal of the credit card unless the cardholder otherwise notifies Oxfam in Macau.) 自動轉賬表格 (<u>只限中國銀行澳門分行/中國銀行(澳門)戶口持有人</u>) (請郵寄正本至澳門樂施會) Autopay Authorization Form For Bank Account holder of Bank of China Macau Branch/ Bank of China (Macau) (Please send back the original to Macau Office) 港幣捐款會兌換為澳門幣計算。All donations in HKD are converted to MOP. 致:中國銀行澳門分行/中國銀行(澳門) To: BANK OF CHINA MACAU BRANCH/ BANK OF CHINA (MACAU) l/We hereby authorize Bank of China Macau Branch/ Bank of China (Macau) (hereinafter referred to as "the Bank") to act as per instruction(s) (marked with " $\sqrt{}$ ") below: 本人(等) /本公司茲授權中國銀行澳門分行/中國銀行(澳門) (以下簡稱 貴銀行)以下事項 (以"\"選擇所需項目): To effect transfers from my/our account specified below to the account of the institution (hereinafter 本人(等)/本公司於 貴銀行開立之賬戶(賬戶號碼附誌如下)內支取款項. referred to as "the Beneficiary"), details of which specified below. This authorization shall valid until further notice. 繳付下述機構的捐款,直至另行通知為止。 □申請代付款; □修改代付款; 本人(等)/本公司知悉及遵守下述條款辦理: Amendment of debit authorization ■ Application for debit authorization IMe further agree that:
 The Bank may effect transfers from my/our said account such sum or sums as advised by the Beneficiary at any time with immediate effect.
 Under no circumstances shall the Bank be held responsible for any consequence(s) as a result 貴銀行接到機構的付款通知即可支付,款項按機構所提供之金額扣除。 如該賬款未能自本人(等)/本公司之銀行賬戶內支付‧一切責任及後 果.概與 貴銀行無涉。 Under no circumstances shall the bank be near responsible for any consequence(s) as a resu of unsuccessful transfer of fund(s) from my/our said account.

Any variation or cancellation of this authorization has to be given by notice in writing. This authorization shall remain valid unless such notice is given to and received by the Bank. For consecutive times, transfers are not effected due to no sufficient available fund in my/our said account, the Bank may as its own discretion not to comply with or act further with this control to the complete of the control of the co 如有任何令授權書失效之變更·本人(等)/本公司/樂施會必須書面通知 貴銀行。 貴銀行在收到書面通知前·本授權書繼續有效。 但如本人 (等)/本公司之銀行賬戶連續三次因賬戶可用餘額不足而未能支付賬 款·則貴銀行可有權不經通知而撤銷此項授權。 貴銀行有權徵收服務費用·並可由本人(等)/本公司之銀行賬內支付。 authorization without notice to me/us. Service charge of the Bank will be debited from my/our said account 銀行認為必要和適當時‧不必通知或取得本人(等) /本公司同意有權將 The Bank may disclose details of my/our said account to any other third party if the Bank finds it 有關的賬戶資料披露給其他機構。 necessary and appropriate.

The Bank shall be entitled to convert the sum or sums to be transferred into the currency 6. 本人(等)/本公司授權 貴銀行可根據自動扣賬當天 貴銀行所指定的 6. accepted by the Beneficiary at a rate determined by the Bank.

If this "Debit Authorization Form" is not directly sent to the Bank, I/We agree to take all the legal 匯率將轉賬款項兌換成受益人指定之收款貨幣。 本人(等)/本公司同意如由於本授權書並非直接交予 貴銀行以致本授 or/and economical responsibilities caused by disclosing the details of the said form to any other 權書所載之資料披露予第三者知悉·由此引起之任何法律或其他經濟責任由本人(等)/本公司承擔概與 貴銀行無涉。 third party. Under no circumstances your bank shall be responsible. 收款機構名稱(受益人): Name of party to be credited (The Beneficiary): 澳門樂施會 Oxfam in Macau 18-01-01-20-8409511 本人(等)/本公司之銀行戶口姓名 My / our Account Name: 本人(等)/本公司銀行戶口之簽署 My / our signature (s) as recorded at your bank 本人(等)/本公司之銀行戶口號碼 My / our Account Number: □港幣 HKD □澳門幣 MOP 此欄由樂施會及銀行填寫 For Official Use Only 由銀行填寫 For Bank use

澳門宋玉生廣場 258 號建興龍廣場 18 樓 F 室 Alameda Dr. Carlos d'Assumpção, No.258, Praça Kin Heng Long, 18 Andar F, Macau 電話 Tel: (853) 2875 7750 傳真 Fax:(853) 2875 7667 澳門免費查詢熱線 Macau Toll Free Hotline: 0800809

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樂施會檔案編號 (合同號碼) Debtor's reference:

您所提供的資料將保密處理,只會被樂施會及受其委託的服務提供者用作捐款處理、寄發收據及有關捐款通訊用途。 為了與您緊密聯繫,向您匯報樂施會的扶貧、倡議及發展教育工作,以及籌募和活動資訊,樂施會及受其委託的服務提供者將會透過您提供的聯絡方法(包括姓名、電話、電郵及郵寄地址),為您提供通訊、籌募、義工招募及相關資訊,以及用作收集意見之用途。若您不願意收到上述資訊及資料,請在方格上加上剔號。口

The personal data collected will be treated as strictly confidential and will be used by Oxfam and its service providers for the purposes of donation administration, receipt